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TRANSMITTAL LETTER

TO: Registration Section		
Division of Corporati	ons	
SUBJECT:	(Name of Limited Liability Company)	- ALLANASSER PARILLA
The enclosed Articles of Organ	nization and fee(s) are submitted for filing.	Allasson, Py.
Pleaso	return all correspondence concerning this matter to the following:	14 May 14
	Michelle Leishman	ROUNCE S
	(Name of Person)	
	NJ HOLDING, LLC	
	(Firm/Company)	:
	1801 N. Flagler Dr., #638	
	(Address)	
	West Palm Beach, FL 33401	
<u></u>	(City/State and Zip Code)	-
For further information concern	ning this matter, please call:	
Denine M. Ward	at (561) 575-7692	
(Name of Pers	on) (Area Code & Daytime Telephone Number)	

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tailahassee, Florida 32314

ARTICLES OF ORGANIZATION **FOR** FLORIDA LIMITED LIABILITY COMPANY

M. All	Jan Market Services		\$.
`4,	Maria Color	14 S	1.18
		Most	5

ARTICLE II - Address:		
	he principal office of the Limited Liability Company	
Principal Office Address:	Mailing Address:	
1801 N. Flegler Dr., #638	1801 N. Flagler Dr., #638	
West Palm Beach, FL 33401	West Palm Beach, FL 33401	

The name and the Florida street address of the registered agent are:

MICHELLE LEISHMAN
Name
1801 N. Flagler Dr., #638
Florida street address (P.O. Box NOT acceptable)

WEST PALM BEACH

33401 FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes...

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

FAX NO. : 561 575 0920 FROM : IMPRO DRYWALL, INC. R&D WARD

		SOM AND SOME IN THE PARTY OF TH
		The State of the S
ARTICLE IV- Manager(s) 01	Managing Member(s):	ALC: MA
The name and address of each l	Manager or Managing Member is as follows:	TAGO A
Title:	Name and Address:	
"MGR" = Manager		(A)
"MGRM" = Managing Membe	r	Plots
MGRM	MICHELLE LEISHMAN	~ ·
	1801 N. Flagler Dr., #638	
	West Palm Beach, FL 33401	
MGRM	PETER J. RASO	
	1801 N. Flagler Dr., #638	
	West Palm Beach, FL 33401	
		
		
(Use attachment if necessary)		

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Plorida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

MICHELLE LEISHMAN

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)